

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 23, 2001 8:00 am
Secretary of State

03-23-2001 90009 040 ****61.25

0026542

DOCUMENT # N98000004536

1. Entity Name

EAST CENTRAL FLORIDA RESOURCE CONSERVATION AND D.

Principal Place of Business

**2012 E MICHIGAN ST
 ORLANDO FL 32806**

Mailing Address

**2012 E MICHIGAN ST
 ORLANDO FL 32806**

2. Principal Place of Business

1

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3523849

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRANCISCO, NICHOLAS
 2431 PRINCESS CAROL CT
 ORLANDO FL 32807**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
 NAME **FRANCISCO, NICHOLAS**
 STREET ADDRESS **2431 PRINCESS CAROL CT**
 CITY-ST-ZIP **ORLANDO FL 32807**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **LIMMEL, LAWRENCE W**
 STREET ADDRESS **1025 W HARVARD ST**
 CITY-ST-ZIP **ORLANDO FL 32804**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DST** ☐ Delete
 NAME **TAYLOR, PETER W**
 STREET ADDRESS **1765 HURON TRAIL**
 CITY-ST-ZIP **MAITLAND FL 32751**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **MORGAN, KENNETH**
 STREET ADDRESS **1016 PEBBLE BEACH WEST**
 CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE **D** ☐ Change ☒ Addition
 NAME **Richard Tyson**
 STREET ADDRESS **284 Morning Glory Drive**
 CITY-ST-ZIP **Lake Mary, Florida 32746**

TITLE **D** ☐ Delete
 NAME **ROBERTS, ROY III**
 STREET ADDRESS **P.O. BOX 334**
 CITY-ST-ZIP **SCOTTSMOOR FL 32775**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **WHITE, J. MARION**
 STREET ADDRESS **2700 CELERY AVE**
 CITY-ST-ZIP **SANFORD FL 32771**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NICHOLAS FRANCISCO
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/01

Date

407/896-0353

Daytime Phone #

CR2E037 (10/00)